24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E) FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)			
TE	EA PARTY MAJORITY FUND		C C00566174
			C 00300174
Check if 24-hour report X 48-hour report New report Amends report filed on			
Т	Full Name of Payee		Date of Public Distribution/Dissemination
ı	INFOCISION MANAGEMENT CORP		01 12 2016
	Mailing Address 325 SPRINGSIDE DRIVE		Amount
ŀ	City State	Zip Code	6186.37
	AKRON OH	44333	Transaction ID : SE.4156 Date of Disbursement or Obligation
	Purpose of Expenditure VOTER CONTACT OVER SEVERAL WEEKS	Category/ Type 004	01 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ŀ	Name of Federal Candidate	Support Of	ffice Sought: House District:00
	HILLARY RODHAM CLINTON		President Senate State: AL
	Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary
Γ	Full Name of Payee	·	Date of Public Distribution/Dissemination
ı	INFOCISION MANAGEMENT CORP		01 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ŀ	Mailing Address 325 SPRINGSIDE DRIVE		01 12 2010
ı			Amount
ŀ	City State	Zip Code	899.24
	AKRON OH	44333	Transaction ID : SE.4157 Date of Disbursement or Obligation
	Purpose of Expenditure VOTER CONTACT OVER SEVERAL WEEKS	Category/ 004	01 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Type 004	12 2010
ı	Name of Federal Candidate	Support O	ffice Sought: House District: 00
	HILLARY RODHAM CLINTON	Oppose	President Senate State: AK
١	Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General
			Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures			
(0	c) TOTAL Independent Expenditures	·	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	SCOTT B MACKENZIE [Electro	onically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		